

# **Arlee Health Center**

### **Executive Summary**

Summarizes the Site, Parking, Facility Size, Staff and Contract Health Dollars necessary for the Service Delivery Plan in 2015. Identifies the Direct Care Services Offered to include highlighting any new services. Identifies the communities and population served for each service.

The second page of the Executive Summary documents the priority resource issues as identified through the Master Planning process.

### **Historical Utilization**

Documents 3 years of RPMS and contract care workloads provided to the user population of the Service Delivery Area by product line and specialty.

### Market Assessment

Compares the Historical Workload to the Health System Planning software and to national averages of patient care utilization, projecting future workloads based upon the worst case of these three planning scenarios. Also documents the percentage of care that will require contracting due to acuity and the quantity of care that can potentially be served by the direct care system.

# Service Delivery Plan

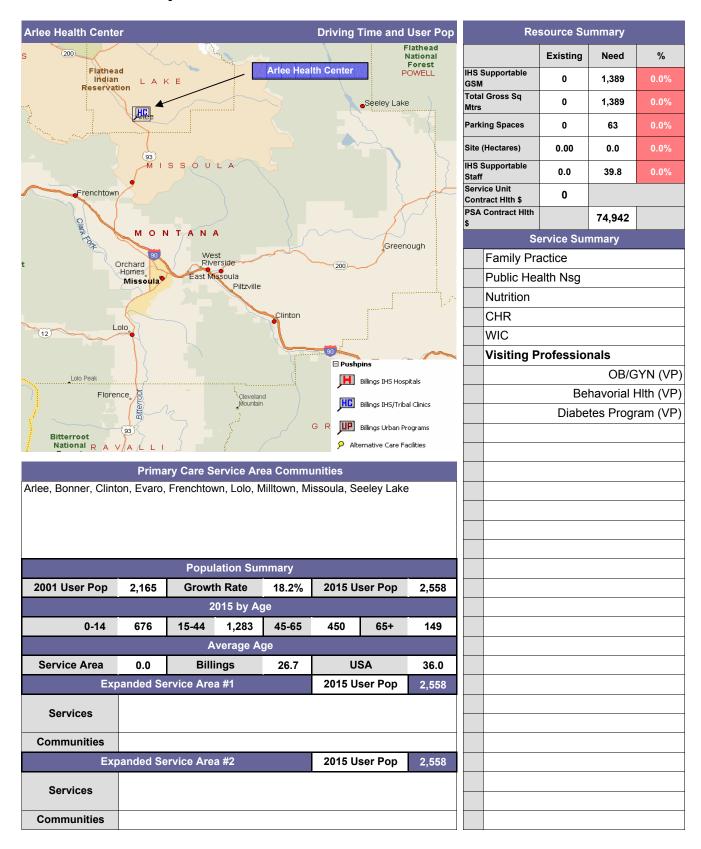
Recommended service delivery plan by product line based upon projected workload, key characteristics, patient classification and tribal and IHS input.

#### Resource Allocation

Quantifies the necessary space and key characteristics for the Service Delivery Plan and compares them against existing resources. Also tabulates necessary contract health dollars based on the delivery plan.



# **Executive Summary**



# **Executive Summary**

	Services & Resourcing Priorities
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	



# **Executive Summary**

	Campus Infrastructure Priorities
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	

	Functional Deficiencies										
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											

# **Historical Workloads**



# **Historical Workloads**

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	Direct or Tribal Health Care				Coi	ntract Healt	h Care	
Discipline	1999	2000	2001	Average	1999	2000	2001	Average	% Contract Care
		Provider \	/isits Only			Р	rovider Visits	Only	
Primary Care									
Family Practice				0	0	0	0	0	0%
Internal Medicine				0	0	0	0	0	0%
Pediatric				0	0	0	0	0	0%
Ob/Gyn				0		0	0	0	0%
Emergency Care									
Emergency/Urgent				0	0	0	0	0	0%
ER/Non-urgent				0	0	0	0	0	0%
Specialty Care									
Orthopedics				0				0	0%
Ophthalmology				0				0	0%
Dermatology				0				0	0%
General Surgery				0				0	0%
Otolaryngology				0				0	0%
Cardiology				0				0	0%
Urology				0				0	0%
Neurology				0				0	0%
Nephrology				0				0	0%
Allergy				0				0	0%
Pulmonology		_	_	^	_	_	_	^	00/
Gerontology									
Gastroenterology	N	o Provide	r Codes	within RP	MS Syste	m for the	se types	of Specia	alist.
Rheumatology							71		
Oncology									
Pediatric-Genetics				0				0	0%
Traditional Healing				0				0	0%
Totals	0	0	0		0	0	0		0%
Direct & Tribal Care + Contract Care	0	0	0						

<sup>\*</sup> Provider Visits - Document visits to a Physician, Nurse Practitioner, Midwife, and or Physician Assistant.

**Other Ambulatory Care Services** 

Dental Service Minutes				0				0	0%
Optometry Visits				0				0	0%
Podiatry Visits				0				0	0%
Dialysis Patients				0				0	0%
Audiology Visits				0				0	0%
Outpatient Behavioral									_
Health									
Mental Health Visits	0	0	0	0				0	0%
Psychiatry				0				0	0%
Social Services Visits				0				0	0%
Alcohol & Substance Abuse				0				0	0%
Visits				U				U	0 76
BH Visit Totals	0	0	0	0	0	0	0	0	0%

# **Historical Workloads**



# **Historical Workloads**

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

Direct or Tribal Health Care						Contract Health Care					
		Direct or Trib	ai neaith Ca	ire		Co	ntract meaiti	ı Care			
Discipline	1999	2000	2001	Average	1999	2000	2001	Average	% Contract Care		
Inpatient Care											
Labor & Delivery Births	0	0	0	0				0	0%		
Obstetrics Patient Days	0	0	0	0				0	0%		
Neonatology Patient Days	0	0	0	0				0	0%		
Pediatric Patient Days	0		0	0				0	0%		
Adult Medical Patient Days								•	22/		
Cardiology	0	0	0	0				0	0%		
Endocrinology	0	0	0	0				0	0%		
Gastroenterology	0	0	0	0				0	0%		
General Medicine	0	0	0	0				0	0%		
Hematology	0	0	0	0				0	0%		
Nephrology	0	0	0	0				0	0%		
Neurology	0	0	0	0				0	0%		
Oncology	0	0	0	0				0	0%		
Pulmonary	0	0	0	0				0	0%		
Rheumatology	0	0	0	0				0	0%		
Unknown	0	0	0	0	_	_		0	0%		
Medical Patient Day Total	0	0	0	0	0	0	0	0	0%		
Adult Surgical Patient Days											
Dentistry				0				0	0%		
Dermatology				0				0	0%		
General Surgery				0				0	0%		
Gynecology				0				0	0%		
Neurosurgery				0				0	0%		
Ophthalmology				0				0	0%		
Orthopedics				0				0	0%		
Otolaryngology				0				0	0%		
Thoracic Surgery				0				0	0%		
Urology				0				0	0%		
Vascular Surgery				0				0	0%		
Surgical Patient Day Total				0	0	0	0	0	0%		
Psychiatry Patient Days				0				0	0%		
Medical Detox Patient Days				0				0	0%		
Sub Acute/Transitional Care	0	0	0	0				0	0%		
Inpatient Care Totals	0	0	0	0	0	0	0	0	0%		
Direct & Tribal + Contract											
Care	0	0	0	0	No [	Data Sour	rce at this	s time			
Substance Abuse Non- Acute	Care				$\overline{}$						
		-	+		<del></del>						
Adult Residential Treatment	0	0	0	0	0	0	0	0	0%		
Adol. Residential Treatment	0	0	0	0	0	0	0	0	0%		
SA Transisitional Care	0	0	0	0	0	0	0	0	0%		
Substance Abuse Totals	0	0	0	0	0	0	0	0	0%		
Elder Care											
Skilled Nursing Patients		0	0	0	0	0	0	0	0%		
Assisted Living Patients		0	0	0	0	0	0	0	0%		
Hospice Patients		0	0	0	0	0	0	0	0%		
Nursing Home Totals	0	0	0	0	0	0	0	0	0%		
			•	_		•					

### **Historical Workloads**



# **Historical Workloads**

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	irect or Trib	al Health Ca	ire		Contract Health Care					
Discipline	1999	2000	2001	Average	1999	2000	2001	Average	% Contract Care		
Ancillary Services											
Lab Billable Tests	0	0	0	0	0	0	0	0	0%		
Pharmacy Scripts	0	0	0	0	0	0	0	0	0%		
Acute Dialysis Procedures	0	0	0	0	0	0	0	0	0%		
Radiographic Exams	0	0	0	0				0	0%		
Ultrasound Exams	0	0	0	0	0	0	0	0	0%		
Mammography Exams				0	0	0	0	0	0%		
Fluoroscopy Exams				0	0	0	0	0	0%		
CT Exams				0	0	0	0	0	0%		
MRI Exams	0	0	0	0	0	0	0	0	0%		
Nuclear Medicine Exams	0	0	0	0	0	0	0	0	0%		
Rad. Oncology Treatments	0	0	0	0	0	0	0	0	0%		
Chemotherapy Treatments				0	0	0	0	0	0%		
Physical Therapy Visits	0	0	0	0	0	0	0	0	0%		
Occupational Therapy Visits	0	0	0	0	0	0	0	0	0%		
Speech Therapy Visits				0	0	0	0	0	0%		
Respiratory Therapy	0	0	0	0	0	0	0	0	0%		
Cardiac Catherization	0	0	0	0	0	0	0	0	0%		
Home Health Care Patients	0	0	0	0	0	0	0	0	0%		
Minor Procedure Cases	•	•	4	0	0	•	•	•	0.00/		
Endoscopy	0	0	1	0	0	0	0	0	0.0%		
Outpatient Surgery Cases Cardiovascular				0	0	0	0	0	0%		
Digestive	0	0	0	0	0 0	0 0	0 0	0	0%		
Endocrine	0	0	0	0	0	0	0	0	0%		
ENT	0	0	U	0	0	0	0	0	0%		
Gynecology	0	0		0	0	0	0	0	0%		
Hemic and Lymphatic	0	0	0	0	0	0	0	0	0%		
Integument	0	0	0	0	0	0	0	0	0%		
Musculoskeletal	0	O	0	0	0	0	0	0	0%		
Nervous	0	0	0	0	0	0	0	0	0%		
Ocular	0	0	0	0	0	0	0	0	0%		
Respiratory	0	0	0	0	Ö	0	Õ	Ö	0%		
Urogenital	0	0	0	0	0	0	0	0	0%		
OP Surgical Case Total	0	0	0	0	0	0	0	0	0%		
Inpatient Surgery Cases				0	66	16	0	27	100.0%		
Surgical Case Total	0	0	0	0	66	16	0	27	100%		
Direct & Tribal + Contract Care	66	16	0	27							
							_	_			
EMS - Pre-Hospital Resp.	0	0	0	0	0	0	0	0	0%		
EMS - Inter Hospital Resp	0	0	0	0	0	0	0	0	0%		

### **Market Assessment**



### **Market Assessment**

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2001			2015		2015 PI	anning Ass	umption
HSP User Pop PSA		2,165			2,558		Workload w	ith Diabetes In	npact
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
Dalasaasaasaa	Pro	vider Visits Or	nly	Pr	ovider Visits On	ly	P	rovider Visits O	nly
Primary care	0	2,418		0	2,855		2,855	2.055	0
Family Practice Internal Medicine	0	2,418 891		0 0	2,855 1,050		1,050	2,855 1,050	0 0
Pediatric	0	1,120		0	1,329		1,030	1,030	0
Ob/Gyn	0	943		0	1,113		1,113	1,113	0
Primary Care Sub-Tot.	0	5,373	7,386	0	6,347	8,720	8,720	8,720	0
Emergency Care									
Emergency/Urgent	0	488		0	576	,	576	576	0
ER/Non-urgent	0	325		0	384		384	384	0
Emerg. Care Sub-Tot.	0	813	930	0	961	1,098	1,098	1,098	0
Specialty Care									
Orthopedics	0	415		0	489		489	489	0
Ophthalmology	0	270		0	319		323	323	0
Dermatology	0	323		0	381		381	381	0
General Surgery	0	313		0	370		370	370	0
Otolaryngology	0	188		0	223		223	223	0
Cardiology	0	82		0	97		97	97	0
Urology	0	101		0	119		119	119	0
Neurology	0	87		0	103		103	103	0
Other Specialties		685		0	808		808	808	0
Nephrology	0	Unknown		0	Unknown		0	0	0
Allergy	0	Unknown		0	Unknown		0	0	0
Pulmonology	0	Unknown		0	Unknown		0	0	0
Gerontology	0	Unknown		0	Unknown		0	0	0
Gastroenterology	0	Unknown		0	Unknown		0	0	0
Rheumatology	0	Unknown		0	Unknown		0	0	0
Oncology	0	Unknown		0	Unknown		0	0	0
Pediatric-Genetics	0	Unknown		0	Unknown		0	0	0
Traditional Healing	0	Unknown		0	Unknown		0	0	0
Specialty Care Sub-Tot.	0	2,465	372	0	2,908	441	2,913	2,913	0
Total Provider Visits By PSA Residents	0	8,651	8,688	0	10,215	10,259	12,731	12,731	0
D	Unmet	0.000	O	- if (1)					
Provider Visits	need if (-)	-8,688	Over Utilization	лі іі (т)					
Total Provider Patient	0.00	4.00	4.01		s established by	dividing the	Total Provide	er Visits from th	e PSA by
Utilization Rate Other Ambulatory Care				the User F	opulation.				
Services									
Dental Service Minutes	0	193,885	205,675	0	229,054	243,010	243,010	243,010	0
Optometry Visits	0	Unknown		0	Unknown	830	849	849	0
Podiatry Visits	0	391		0	460		481	481	0
Dialysis Patients	0	Unknown		0	Unknown		0	0	0
Audiology Visits	0	325	219	0	384	260	384	384	0
Outpatient Behavioral Health	Services								
Mental Health Visits	0	Unknown	388	0	Unknown	459	459	459	0
Psychiatry	0	233		0	275		275	275	0
Social Services Visits	0	Unknown		0	Unknown		0	0	0
Alcohol & Substance Abuse	0	Unknown		0	Unknown		0	0	0
BH Visits Totals	0	233	388	0	275	459	734	734	0

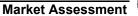




### **Market Assessment**

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2001			2015		2015 PI	anning Ass	umption
HSP User Pop PSA		2,165			2,558		Workload w	rith Diabetes In	npact
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
Inpatient Care	Provider Visits Only		Provider Visits Only			Provider Visits Only			
Labor & Delivery Births	0	43	29	0	51	35	51	42	9
Obstetrics Patient Days	0	95	62	0	112	74	112	92	20
Neonatology Patient Days	0	109		0	130		130	79	51
Pediatric Patient Days	0	54	72	0	64	85	85	54	31
Adult Medical Patient Days									
Cardiology	0	57		0	67		73	55	18
Endocrinology	0	10		0	12		14	14	0
Gastroenterology	0	37		0	43		43	43	0
General Medicine	0	44		0	52		52	47	5
Hematology	0	7		0	8		8	4	4
Nephrology	0	11		0	12		12	11	2
Neurology	0	24		0	28		31	27	4
Oncology	0	15		0	18		18	6	12
Pulmonary	0	56		0	66		66	55	11
Rheumatology	0	2		0	2		2	2	0
Unknown	0	4		0	5		5	5	0
Medical Patient Day Total	0	267	205	0	314	243	325	269	56
Adult Surgical Patient Days									
Dentistry	0	1		0	1		1	0	0
Dermatology	0	2		0	2		2	2	0
General Surgery	0	80		0	95		95	63	31
Gynecology	0	19		0	23		23	19	3
Neurosurgery	0	20		0	23		23	8	15
Ophthalmology	0	1		0	1		1	0	0
Orthopedics	0	48		0	57		57	48	9
Otolaryngology	0	17		0	20		20	3	17
Thoracic Surgery	0	29		0	34		34	2	33
Urology	0	11 19		0	13 22		13 22	6 9	7 13
Vascular Surgery Surgical Patient Day Total	0	246	138	0	290	164	290	160	129
Psychiatry Patient Days	0	48	31	0	290 56	37	56	15	42
			31			31			
Medical Detox Patient Days	0	8		0	9		9	6	3
Sub Acute/Transitional Care	0	146		0	172		172	172	0
Inpatient Care Totals	0	973	508	0	1,148	603	1,179	847	332
Inpatient Patient Days	Unmet need if (-)	-973	Over Utilization	on if (+)					
Substance Abuse Non-Acute	Care								
Adult Residential Treatment	0	392		0	462		462	462	0
Adol. Residential Treatment	0	90		0	105		105	105	0
SA Transitional Care	0	15		0	18		18	18	0
Substance Abuse Total	0	497	0	0	585	0	585	585	0
Elder Care									
Skilled Nursing Patients	0	3		0	4		4	4	0
Assisted Living Patients	0	4		0	4		4	4	0
Hospice Patients	0	0		0	0		0	0	0
Nursing Home Total	0	7	0	0	8	0	8	8	0





### **Market Assessment**

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2001			2015		2015 Planning Assumption			
HSP User Pop PSA		2,165			2,558			ith Diabetes In		
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care	
	Pro	ovider Visits On	ly	Pro	ovider Visits On	ly	Pr	ovider Visits Or	nly	
Ancillary Services										
Laboratory Services				-						
Clinical Lab Billable Tests		8,726	6,668		10,298	7,876	10,298	9,347	597	
Microbiology Billable Tests		1,246	1,584		1,471	1,871	1,871	1,084	723	
Blood Bank Billable Tests		217	128		256	152	256	242	5	
Anatomical Pathology		18	43		21	50	50	0	48	
Lab Billable Tests	0	10,207	8,423	0	12,046	9,949	12,046	10,674	1,373	
Pharmacy Scripts	0	21,627		0	25,538		25,538	25,538	0	
Acute Dialysis Procedures	0	6		0	7		7	7	0	
Radiographic Exams	0	726	777	0	857	917	917	917	0	
Ultrasound Exams	0	148	107	0	174	126	174	174	0	
Mammography Exams	0	287	301	0	338	351	351	351	0	
Fluoroscopy Exams	0	36	54	0	43	63	63	63	0	
CT Exams	0	56	18	0	66	22	66	66	0	
MRI Exams	0	39		0	46		46	46	0	
Nuclear Medicine Exams	0	Unknown		0	Unknown		0	0	0	
Rad. Oncology Treatments	0	Unknown		0	Unknown		0	0	0	
Chemotherapy Treatments	0	Unknown		0	Unknown		0	0	0	
Rehabilitation Services										
Physical Therapy Visits	0	Unknown		0	Unknown		0	0	0	
Occupational Therapy Visits	0	Unknown		0	Unknown		0	0	0	
Speech Therapy Visits	0	Unknown		0	Unknown		0	0	0	
Rehab Total Visits	0	-	997	0	-	1,172	1,172	1,172	0	
Respiratory Therapy		Unknown	8,786	0	Unknown	10,415	10,415	10,415	0	
Workload Minutes	0		0,700			10,410				
Cardiac Catherization Cases	0	9		0	16		16	16	0	
Home Health Care Patients	0	13		0	15		15	15	0	
Minor Procedure Cases										
Endoscopy		34			40		40	40	0	
Outpatient Surgery Cases	_									
Cardiovascular	0	2		0	3		3	3	0	
Digestive	0	36		0	43		43	43	0	
Endocrine	0	0		0	0		0	0	0	
ENT	0	16		0	18		18	18	0	
Gynecology	0	13		0	15		15	15	0	
Hemic and Lymphatic	0	1		0	1		1	1	0	
Integument	0	14		0	16		16	16	0	
Musculoskeletal	0	23		0	27		27	27	0	
Nervous	0	6		0	7		7	7	0	
Ocular	0	13		0	15		15	15	0	
Respiratory	0	2		0	2		2	2	0	
			0.1							
Surgical Case Total	21	189	114	32	223	13/	223	198	25	
EMS Responses	0	284		0	335		335	335	0	
Urogenital OP Surgical Case Total Inpatient Surgery Cases Surgical Case Total	0 0 27 27	9 135 54 189	61 53 114	0 0 32 32	11 159 64 223	74 63 137	11 159 64 223	11 159 39 198	0 0 25 25	
1 1000011000	_	_•.		-			300		•	

### **Delivery Plan**

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need		Delivery Options					
	Planned Direct	Key Characteristics	# Req'd		PSA			ls due to shold	
Discipline	Care	(KC)	in 2015	On Site	On Site On Site VP CHS*			Region	Remarks

**Primary Care** Migration % (Provider Visits) 0.0%

Primary Care Clinic examines, diagnoses, and treats ambulatory patients giving continuity and coordination to their total healthcare including referral to other health professionals and admissions to inpatient services while retaining primary responsibility for care of these patients, as appropriate. Primary Care Clinic assesses, provides, and evaluates the care of patients with healthcare problems including history and physical, assessment and treatment of common minor illnesses, maintenance care of patients with chronic diseases, and health counseling and teaching.

Family Practice	5,228	Providers	1.2	7,607				
Internal Medicine	1,050	Providers	0.3	-				
Pediatric	1,329	Providers	0.3					
Ob/Gyn	1,113	Providers	0.4		1,113			Local Contract
Primary Care Total	8,720	Providers	2.1	7,607	1,113	0	0	

Migration % **Emergency Care** 0.0%

The Emergency Medical Clinic provides emergency care, diagnostic services, teatment, surgical procedures, and proper medical disposition of an emergency nature to patients who present themselves to the service. It refers patients to specialty clinics and admits patients as needed; provides clinical consultation services and professional training of assigned personnel; supports mass casualty and fire drills; and prepares reports.

Emergency/Urgent	576	Patient Spaces	0.3		
ER/Non-urgent	384	Providers	0.1		
Emergency Care Total	1,098	Patient Spaces	0.6	1,098	CHS @ SU

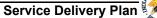
#### **Specialty Care**

Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team. The service is typically provided by visiting providers who have established clinic hours for consistent referral patterns.

	, r	.,						
Orthopedics	489	Providers	0.2				489	
Ophthalmology	323	Providers	0.1				323	CHS @ SU
Dermatology	381	Providers	0.1	·				Telemedicine
General Surgery	370	Providers	0.1	·			370	CHS @ SU
Otolaryngology	223	Providers	0.1	·			223	CHS @ SU
Cardiology	97	Providers	0.0	·			97	CHS @ SU
Urology	119	Providers	0.0				119	CHS @ SU
Neurology	103	Providers	0.1	·			103	CHS @ SU
Other Subspecialties	808	Providers	0.3				808	CHS @ SU
Nephrology	0	Providers	0.0					
Allergy	Unknown	Providers	0.0	·				
Pulmonology	Unknown	Providers	0.0	·				
Gerontology	Unknown	Providers 1	Jnknown	·				
Gastroenterology	Unknown	Providers	0.0	·				
Rheumatology	Unknown	Providers 1	Jnknown	·				
Oncology	Unknown	Providers	0.0	·				
Pediatric-Genetics	Unknown	Providers 1	Jnknown					
Traditional Healing	0	Providers	0.0	Χ				
Specialty Care Sub- Total	2,913			0	0	0	2,532	

Other Ambulator	У
Care Services	

Care Services										
Dental Service	243,010	Dentists	2.4	243,010	At St Ignatius					
Dental Clinic provides assistance in achieving and maintaining the highest level of oral health possible. It also emphasizes the prevention of disease.										
Optometry Visits	849	Optometrist	0.4	849	At St Ignatius					
	•			efraction and other procedures, prescribes lenses to correct refractive	e error and improve					
vision; and refers patients to physicians for diagnosis and treatment of suspected disease.										
Podiatry Visits	481	Podiatrists	0.2	481	At St Ignatius					





### **Delivery Plan**

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

	Projected Need			Delivery Options					
	Planned Direct	Key Characteristics	# Req'd	PSA			Referrals due to Threshold		
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks

Podiatry examines, diagnoses, and treats patients with disorders, diseases, and injuries to the foot or adjunctive tissue; provides follow-up care for selected postoperative ambulatory patients; provides a comprehensive plan of care for patients, including monitoring and maintaining their state of health, counseling and guidance, health eduation, rehabilitation, and prevention of disease; and provides clinical and consultation services, medical care evaluation, professional training of assigned personnel, preparation and submission of reports, and maintenance of medical records.

**Dialysis Patients** 0 Dialysis Stations 0.0

Dialysis provides the purification of the patient's blood through use of an artificial kidney machine or similar device. Specially trained personnel operate, maintain, and monitor the hemodialysis equipment and other specialized support equipment for patients who are undergoing hemodialysis treatment in the unit.

0.2 Audiologists

The Audiology Clinic provides comprehensive audiologic support for patients for the determination of etiology, pathology, and magnitude of hearing loss and potential for remediation and rehabilitation; assists in the evaluation of auditory and vestibular systems. Specific services include pure tone threshold audiometry; basic and advanced clinical testing; pediatric evaluations; neonatal hearing testing as part of the early hearing loss identification program; hearing aid evaluation, fittings, and repairs; ear mold fittings; vestibular evaluations, dispensing of hearing protection devices (fitting, education, and motivation); determination of proper referral and disposition.

#### **Behavioral Health**

Behavioral Health provides psychiatric, psychological, psychosocial, substance abuse, and socioeconomic evaluation and consultation; individual and group services, patient care, information, referral, and follow-up services to facilitate medical diagnosis, care, treatment; and proper disposition of patients (inpatient and outpatient) referred to the Social Work Clinic, which includes self-referred patients and those seen automatically on the basis of diagnosis (for example, suspected child abuse or attempted suicide). It provides a comprehensive plan of service to patients and their families including counseling and guidance, therapy, information and referral, and discharge planning; provides clinical and consultative services to patients and families, social service delivery evaluation; professional training of assigned and contractually affiliated personnel; prepares and submits reports; maintains medical and social service records.

Mental Health Visits	459	Counselors	0.0		X	From St. Ignatius
Psychiatry Provider	275	Providers	0.2		Х	
Social Service Visits	0	Counselors	0.0		х	
Alcohol & Substance Abuse Visits	0	Counselors	0.0		x	
Behavioral Health Totals	734	Counselors	0.0	0	х	

Inpatient Care					
Labor & Delivery	42	LDRs	0.6	42	CHS @ SU
Obstetrics Patient	92	# of Beds	1.1	92	CHS @ SU

Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.

Neonatology Patient 79 # of Bassinets 1.0 79 CHS @ SU Davs

The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.

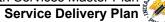
Pediatric Patient Days # of Beds CHS @ SU

Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.

#### Adult Medical Acute Care

Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.

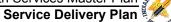
Cardiology	55	# of Beds 0.4	55	CHS @ SU
Endocrinology	14	# of Beds 0.1	14	CHS @ SU



# **Delivery Plan**

		Projected Need				Deliv	ery Options	\$	
	Planned Direct	Key Characteristics	# Req'd		PSA			s due to shold	
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Gastroenterology	43	# of Beds	0.3				43		CHS @ S
General Medicine	47	# of Beds	0.3	-			47		CHS @ S
Hematology	4	# of Beds	0.0				4		CHS @ S
Nephrology	11	# of Beds	0.1	-			11		CHS @ S
Neurology	27	# of Beds	0.2	-			27		CHS @ S
Oncology	6	# of Beds	0.0	-			6		CHS @ S
Pulmonary	55	# of Beds	0.4				55		CHS @ S
Rheumatology	2	# of Beds	0.0	-			2		CHS @ S
Unknown	5	# of Beds	0.0				5		CHS @ S
Medical Patient Day  Total	269	n or beds	1.9	0		0	269	0	0110 @ 0
ับเลเ Adult Surgical Acute Ca	re								
urgical Care provides inpa		and consultative evaluat	ion in the si	uraical specia	lties and subspe	cialties des	scribed in this	subsection: co	oordinates
ealthcare delivery relative					,				
repares medical records; a					• .				•
When subspecialty services									
rocedures, studies, and th	erapies.								
Dentistry	0	# of Beds	0.0				0		CHS @ S
Dermatology	2	# of Beds	0.0				2		CHS @ S
General Surgery	63	# of Beds	0.6				63		CHS @ S
Gynecology	19	# of Beds	0.2	-			19		CHS @ S
Neurosurgery	8	# of Beds	0.1				8		CHS @ S
Ophthalmology	0	# of Beds	0.0				0		CHS @ S
Orthopedics	48	# of Beds	0.4	-			48		CHS @ S
Otolaryngology	3	# of Beds	0.0				3		CHS @ S
Thoracic Surgery	2	# of Beds	0.0	-			2		CHS @ S
Urology	6	# of Beds	0.1	-			6		CHS @ S
Vascular Surgery	9	# of Beds	0.1	-			9		CHS @ S
Surgical Patient Day	160	# of Beds	1.4	0		0	160	0	31.3 @ 3
Total ntensive Care Unit	86	# of beds	0.3				86		CHS @ S
ntensive Care Units (ICUs)				ensified. com	prehensive obse	rvation and		e of shock, tra	
hreatening conditions. The	•	•	•						
sychiatry Patient	15	# of Beds	0.1				15		CHS @ S
Psychiatric Care provides s	pecialized o	care and consultative ev	/aluation for	eligible inpa	tients; coordinate	es healthca	re delivery rel	ative to the ex	amination,
liagnosis, treatment, and p	roper dispo	sition of patients with pa	sychotic, ne	urotic, or oth	er mental disorde	ers; maintai	ins protective	custody of par	tients with
sychiatric disorders when					•	-		_	
rovides short-term treatme					_			ensitive or me	dically privileged
ecords and corresponden				pares medic	al records; and s	ubmits requ			
Medical Detox Patient	6	# of Beds	0.0				6		CHS @ S
Substance Abuse Care pro	vides speci	alized care and consult	ative evalua	tion for eliaib	le inpatients: cod	ordinates he	ealthcare deliv	erv relative to	the examination
liagnosis, treatment, and p				_	•				
when required to prevent in	jury to then	nselves or to others; est	ablishes the	erapeutic regi	mens; conducts	individual d	or group therap	by sessions; r	naintains custod
ensitive or medically privile	eged record	ls and correspondence	that evolve	during treatm	ent of patients; p	orepares m	edical records	; and submits	required reports
Sub Acute /									
Fransitional Care	172	# of Beds	0.6				172		CHS @ S
Fransitional Care provides	care and tre	atment for nationts who	require in	nationt nursin	a care hevend th	oir dischar	ge from acute	care Staffin	a while less than
acute care, provides specifi		•			-	ieli discriar	ge nom acute	care. Stanning	g, wrine less trial
npatient Care Totals	934	# of Beds	7	0		0	934	0	
Substance Abuse									<u> </u>
Non-Acute Care									
Substance Abuse Non-Acu	te Care - th	e treatment of substance	e ahuse dis	orders in an	age and security	snecific so	ettina		
ubstance Abuse Non-Acu	e Care - In	e treatment of Substant	e abuse dis	oruers in an	aye anu security	specific se	ung.		
				_					
Adult Residential	462	# of Beds	1.7					462	

Treatment



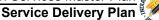
# **Delivery Plan**

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need		Delivery Options					
	Planned Direct	Key Characteristics	# Req'd		PSA			s due to	
Discipline	Care	e (KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Adolescent Residential Treatment	105	# of Beds	0.4					105	
Substance Abuse Transitional Care	18	# of Beds	3.0				18		St. Ignatius
Substance Abuse Non- Acute Care Totals	585		5.1	0		0	18	567	
Elder Care									
Elderly Care Program provid	des physica	al, psychological, social	and spiritu	al care for he	althy and dying	seniors in a	n environmen	t outside of	a hospital.
Nursing Home	4	# of Beds	4.0				4		St. Ignatius
Assisted Living /	4	# of Beds	5.0				4		St. Ignatius
Hospice	0	# of Beds	0.0				0		St. Ignatius
Elder Care Totals	8		9.0	0		0	8	0	
Ancillary Services Laboratory Services									
Clinical Pathology operates systems. Additional activitie samples for testing. The Cli	es may inclu	ude, but are not limited	to, transpor	tation of spec	imens from the	nursing floo	rs and surgica		
Clinical Lab	9,347	ech Staff @ Peak	1.0				9,347		At Polso
Microbiology	1,084	ech Staff @ Peak	0.1				1,084		At Polso
Blood Bank	242	ech Staff @ Peak	0.0			242			
Anatomical Pathology	0	Tech Staff @ Peak	0.0			0			
Anatomical Pathology cond- coutine procedures; provide	s referrals a	and consultations; perfo	rms post-m					is including	diagnostic and
Lab Totals	25,538	Fech Staff @ Peak Pharmacists	1.1				25,538		At St. Ignation
Pharmacy Acute Dialysis	7	Rooms	0.0			7	25,556		At St. Ignatii
Acute Dialysis	•	11001113	0.0						
Acute Dialysis provides puri water and toxins, while the poerform these same function	patient is ho	ospitalized. Specialty tra				located in t			to remove excess
water and toxins, while the poerform these same function Diagnostic Imaging Diagnostic Radiology provice	patient is ho ns in the ho des diagnos	ospitalized. Specialty tra ome settings. tic radiologic services t	ained persol	and outpatie	patients own fa	located in t mily membe	rs through an	intense tra	to remove excess ining program how ing, examining,
water and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology provice Interpreting, storing, and ret	patient is ho ns in the ho des diagnos trieving radi	ospitalized. Specialty tra ome settings. tic radiologic services to ographs and fluorograp	nined persolo o inpatients hs; directing	and outpatie	patients own fa	located in t mily membe	rs through an	intense tra	to remove excess ining program how ing, examining, d patients.
water and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology provice Interpreting, storing, and ret Radiographic	patient is ho ns in the ho des diagnos trieving radi	ospitalized. Specialty tra ome settings. tic radiologic services to ographs and fluorograp Rooms	o inpatients ths; directing	and outpatie	patients own fa	located in t mily membe	rs through an re not limited ulting with ph	intense tra	to remove excess ining program how ing, examining, d patients.
water and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology provice Interpreting, storing, and ret Radiographic Ultrasound	patient is ho ns in the ho des diagnos trieving radi 917 174	ospitalized. Specialty tra ome settings.  tic radiologic services to ographs and fluorograp Rooms Rooms	o inpatients ths; directing	and outpatie	patients own fa	located in t mily membe	re not limited ulting with ph 917 174	intense tra	to remove excess ining program how ing, examining, d patients.  At St Ignation CHS @ S
vater and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology providenterpreting, storing, and ret Radiographic Ultrasound Mammography	patient is ho ns in the ho des diagnos trieving radi 917 174 351	ospitalized. Specialty tra ome settings.  tic radiologic services to ographs and fluorographs.  Rooms Rooms Rooms	o inpatients hs; directing 0.2 0.1 0.1	and outpatie	patients own fa	located in t mily membe	re not limited ulting with ph	intense tra	to remove excess ining program how ing, examining, d patients.  At St Ignation CHS @ SCHS @ SCHS @ SCHS
vater and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology provice Interpreting, storing, and ret Radiographic Ultrasound	patient is ho ns in the ho des diagnos trieving radi 917 174	ospitalized. Specialty tra ome settings.  tic radiologic services to ographs and fluorograp Rooms Rooms	o inpatients this; directing 0.2 0.1 0.1 0.0	and outpatie	patients own fa	located in t mily membe	re not limited ulting with ph 917 174 351 63	intense tra	to remove excess ining program how ing, examining, d patients.  At St Ignati CHS @ S CHS @ S CHS @ S
water and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology providenterpreting, storing, and ret Radiographic Ultrasound Mammography Fluoroscopy	patient is hons in the hons in	ospitalized. Specialty tra ome settings.  tic radiologic services to ographs and fluorographs.  Rooms Rooms Rooms Rooms Rooms	o inpatients hs; directing 0.2 0.1 0.1	and outpatie	patients own fa	located in t mily membe	re not limited ulting with ph	intense tra	to remove excess ining program how ing, examining, d patients.  At St Ignatii CHS @ S CHS @ S CHS @ S CHS @ S
water and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology provide interpreting, storing, and ret Radiographic Ultrasound Mammography Fluoroscopy CT	patient is hons in the hons in	ospitalized. Specialty tra ome settings.  tic radiologic services to ographs and fluorographs.  Rooms Rooms Rooms Rooms Rooms Rooms Rooms	o inpatients hs; directing 0.2 0.1 0.1 0.0 0.0	and outpatie	patients own fa	located in t mily membe	re not limited ulting with ph 917 174 351 63 66	intense tra	to remove excess ining program how ing, examining,

injectable or ingestible radioactive isotopes in conformance with licensure regulations. Functions and activities of the work center include, but are not limited to, performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.

Rad. Oncology	0	Rooms	0.0	0
Chemotherapy	0	Patient Spaces	0.0	0



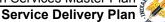
# **Delivery Plan**

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need				Delive	ery Options	
	Planned Direct	Key Characteristics	# Req'd		PSA		Referrals due to Threshold	
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit Region	Remarks
Rehabilitation Services				-				
Rehabilitation Services dev								
and outpatients whose abili	ity to functio	n is impaired or threate	ned by disea	ase or injury a	and incorporate	s activities si	uch as: direct patient car	e, evaluation, testing,
consultation, counseling, te	aching, adn	ninistration, research, a	nd communi	ity services.	This service typ	ically consis	ts of three disciplines: Pl	nysical Therapy,
Occupational Therapy, and	Speech Th							
Physical Therapy	0	Therapy FTE	0.0					
Occupational Therapy	0	Therapy FTE	0.0			Χ		
Speech Therapy	0	Therapy FTE	0.0			Χ		
Rehab Total	1,172	Therapy FTE	0.7				1,172	At St Ignatius
Respiratory Therapy	10,415	Therapy FTE	0.1			10,415		
Respiratory Therapy provid			ification, aero	osol, and cen	tain potent drug	s through inl	halation or positive pressi	ure and provides
other forms of rehabilitative								
analysis. The service also	tests and e	valuates the patient's al	oility to excha	ange oxygen	and other gase	s through me	easurement of inhaled an	d exhaled gases and
analysis of blood.								
Cardiac Catherization	16	Rooms	0.0				16	CHS @ SU
The Cardiac Catheterization	n provides s	services including the o	perations and	d maintenand	e of specialized	d equipment	that displays and records	the condition of the
heart and circulatory system	n. Other ac	tivities include explainii	ng test proce	dures to pati	ents; performing	g invasive pr	ocedures using catheters	and other
techniques; retrieving and a		·					-	
Home Health Care	15	# FTE	1.1				15	At St Ignatius
Home Health Care is provide	ded to indivi		eir places of	residence to	promote maint	ain or restor	-	
independence while minimi			•		•	ann, on rooton	o mount of to maximize t	110 10 01 01
·		occoor areasment, and min		.9 .0				
Surgery								0 " 0
The Surgery product line in	ciuaes Ane	stnesiology, Pre & Post	Recovery, a	ana tne provis	sion of invasive	proceaures i	requiring the sterility of ar	Operating Room or
Minor Procedure Room.								
Minor Procedure								
Endoscopy	40	Endoscopy Suites	0.0				40	CHS @ SU
Outpatient Surgery Cas	es							
Cardiovascular	3	Outpatient ORs	0.0				3	CHS @ SU
Digestive	43	Outpatient ORs	0.0	-			43	CHS @ SU
Endocrine	0	Outpatient ORs	0.0	-			0	CHS @ SU
ENT	18	Outpatient ORs	0.0	-			18	CHS @ SU
Gynecology	15	Outpatient ORs	0.0				15	CHS @ SU
Hemic and Lymphatic	1	Outpatient ORs	0.0	-			1	CHS @ SU
Integument	16	Outpatient ORs	0.0	-			16	CHS @ SU
Musculoskeletal	27	Outpatient ORs	0.0	-			27	CHS @ SU
				-				
Nervous	7	Outpatient ORs	0.0				7	CHS @ SU
Ocular	15	Outpatient ORs	0.0				15	CHS @ SU
Respiratory	2	Outpatient ORs	0.0				2	CHS @ SU
Urogenital	11	Outpatient ORs	0.0				11	CHS @ SU
OP Surgical Case	159	Outpatient ORs	0.1	0	0	0	159	
Inpatient Surgery	39	Inpatient ORs	0.0				39	CHS @ SU
Surgical Case Total	198		0.1	0	0	0	238	
Administrative								
Support								
Administration		# of FTE	6.6	6				
Administration organizes, a	dministers,	and supervises all prof	essional and	administrativ	e aspects of the	e facility; res	ponsible for all personne	assigned or
attached to the facility; dete	ermines med	dical capabilities related	to available	medical serv	vices officers, su	upport staff, a	and facilities; implements	directed programs;
is responsible for the care,	treatment, a	and welfare of all patien	ts.					
Information Manageme	nt	# of FTE	1.5	1				
Information Management D					to dav operation	n. training. m	aintenance and develop	nent of the
computerization hardware,		•					annonano ana ao rompi	
Health Information Man		# of FTE	5.6	4	,		No	Pharm,Dental
Health Information Manage				completing a	analyzina ensu	ring availahil		
called charts) in order to fa		-	_	completing, c	maryzmig, erisui	y uvaliabili	ty, and salekeeping of pe	alon rocords (also
	omicio, eval			2			NI.	Dharm Dental
Business Office	dust : '- '	# of FTE	4.2	2	Manager 1: "			Pharm, Dental
Business Office implements	s aamınistra	tive procedures to max	ımıze net red	covery of hea	ıtıncare delivery	costs from t	nırd-party payers; identifi	es patients that have

other health insurance; reviews all aspects of accounts receivable management, complies with third-party payer requirements; submits all claims to third-party

payers; follows up to ensure that collections are made; and documents and reports collection activities.



# **Delivery Plan**

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need				Deliv	ery Options	;	
	Planned Direct	Key Characteristics	# Req'd		PSA		Referral Thre		
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Contract Health		# of FTE	1.3	0					
Contract Health Service Pa Care, identifying other alte staff.	-	linates access to medi	cal care that		-		-		
Facility Support Services									
Clinical Engineering		# of FTE	0.6	0					o Dental
Clinical Engineering provion determine operational stat equipment; repairs or repla and tests contractor-instal	us, and assig aces worn or	ns serviceability condi broken parts; rebuilds	tion codes to and fabricat	o equipment; tes equipmen	performs schedu t or components	iled preven modifies e	tive maintena quipment and	nce of medica installs new e	l and dental
Facility Management		# of FTE	2.0		2				
The maintenance of a hea	Ith sites facili			3					
Central Sterile		# of FTE	0.7	1					
The decontamination, ass	embly, steriliz	ation and distribution o	of reusable i	instrumentatio	on. Also respons	ible for the	distribution of	other sterile p	roducts.
Dietary		# of FTE	0.0	0					
The ordering, maintenance nutritional consultations wi		•	on of meals	to inpatients,	outpatients and	staff. Nutri	tional oversigi	nt for these me	eals as well as
Property & Supply Property & Supply provide		# of FTE	0.5	0					
managing the installation in Housekeeping & Linen The Housekeeping Service Housekeeping, also, is res	e provides re	# of FTE sponsibility for maintain	2.5 ning the inte						
Preventive Care	<u> </u>								
Health Promotion /				. ———					
Health Promotion / Disease Prevention									
Disease Prevention									
Disease Prevention (Preventive Care) The oversight of all prever		ership to all areas of th	e facility in t	heir efforts to			•		ntire health syste
Disease Prevention (Preventive Care) The oversight of all prever staff. These departments	provide leade	ership to all areas of th	e facility in t	heir efforts to			•	olic.	ntire health syste th Education
Disease Prevention (Preventive Care) The oversight of all prever staff. These departments	provide leade	ership to all areas of th	e facility in t	heir efforts to			•	olic.	
Disease Prevention (Preventive Care) The oversight of all preverstaff. These departments Public Health Nursing Public Health Nutrition	provide leade	ership to all areas of th # of FTE	e facility in t 4.1	heir efforts to			•	olic.	
Disease Prevention (Preventive Care) The oversight of all preverstaff. These departments Public Health Nursing Public Health Nutrition Environmental Health	provide leade	ership to all areas of th # of FTE # of FTE	e facility in t 4.1 0.0	heir efforts to  3  1			•	olic.	
Disease Prevention (Preventive Care) The oversight of all preverstaff. These departments Public Health Nursing Public Health Nutrition Environmental Health Health Education	provide leade	ership to all areas of th # of FTE # of FTE # of FTE	4.1 0.0 0.0	heir efforts to  3  1  0			•	olic.	
Disease Prevention (Preventive Care) The oversight of all preverstaff. These departments Public Health Nursing Public Health Nutrition Environmental Health Health Education  Additional Services Hostel Services	provide lead	# of FTE Rooms	e facility in t 4.1 0.0 0.0 0.0	heir efforts to  3  1  0  0	increase the he	alth awaren	ess of the pul	olic.	
Disease Prevention (Preventive Care) The oversight of all preverstaff. These departments Public Health Nutrition Environmental Health Health Education  Additional Services The provision of temporary	provide lead	# of FTE  # of FTE  # of FTE  Rooms	e facility in t 4.1 0.0 0.0 0.0 0.0	heir efforts to  3  1  0  0  s accompany	increase the he	alth awaren	ess of the pul	olic.	
Disease Prevention (Preventive Care) The oversight of all prever staff. These departments Public Health Nursing	provide lead	# of FTE  # of FTE  Rooms commodations for fan # of FTE	e facility in t 4.1 0.0 0.0 0.0 0.0 1.1	heir efforts to  3 1 0 0 0 s accompany 0.0	increase the he	alth awaren	hospital.	lic.	th Education
Disease Prevention (Preventive Care) The oversight of all prevented. These departments Public Health Nursing Public Health Nutrition Environmental Health Health Education  Additional Services The provision of temporary Case Management	provide lead	# of FTE  # of FTE  Rooms commodations for fan # of FTE	e facility in t 4.1 0.0 0.0 0.0 0.0 1.1	heir efforts to  3 1 0 0 0 s accompany 0.0	increase the he	alth awaren	hospital.	lic.	th Education



# **Delivery Plan**

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

Planned Direct Care (KC) In 2015  Diabetes Program provides for the diabetic patient's education and case management and the prospective diabetimical streening. The program provides for the diabetic patient's education and case management and the prospective diabetimical streening. The program is supported clinically with pre-renal examinations and Podiatry care.  Elder Care - Outreach # of FTE 0.0  Diabetes Program provides an open and supportive environment as well as an outreach program for the community's elders deucation and health benefit counseling is provided by the staff.  EMS 335 Loc #1 - # of FTE 0.0 0.0 335  # of Ambulances 0.0 0.0 0.0 335  # of Ambulances 0.0 0.0 0.0 335  # of Ambulances 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	ery Option	ptions		
Diabetes Program # of FTE 0.0 0.0 X The Diabetes Program provides for the diabetic patient's education and case management and the prospective diabetic patient's education and case management and the prospective diabeticinal screening. The program is supported clinically with pre-renal examiniations and Podiatry care.  Elder Care - Outreach # of FTE 0.0  Elder Care - Outreach # of FTE 0.0  # of FTE 0.0  Loc #2 - # of FTE 0.0  Loc #3 - # of FTE 0.0  Loc #3 - # of FTE 0.0  # of Ambulances 0.0  Loc #3 - # of FTE 0.0  # of Ambulances 0.0  # of FTE	Referra	Referrals du Threshold		
The Diabetes Program provides for the diabetic patient's education and case management and the prospective diabstinical screening. The program is supported clinically with pre-enal examinations and Podiatry care. Elder Care - Outreach # of FTE 0.0  Elder Care - Outreach # of FTE 0.0  Elder Care provides an open and supportive environment as well as an outreach program for the community's elders education and health benefit counseling is provided by the staff.  EMS 335 Loc #1 - # of FTE 0.0 0.0  # of Ambulances 0.0 0.0  Loc #2 - # of FTE 0.0 0.0  # of Ambulances 0.0 0.0  Loc #3 - # of FTE 0.0 0.0  # of Ambulances 0.0 0.0  Emergency Medical Services provide emergency medical services within the boundaries of a service unit. Ambulance seven days a week, staffed with State Certified EMT, IEMT and Paramedics.  Security is responsible for the safety and well being of hospital patients, visitors, and personnel. It includes physical grounds, and interiors of the facility.  Transportation # of FTE 0.0 0.0  Transportation Department transports community residents to health related facilities within the service unit, and sun notured for automotive operation and maintenance and the administration of garage and dispatching activities in supportant of automotive operation and maintenance and the administration of garage and dispatching activities in supportant of automotive operation and maintenance and the administration of garage and dispatching activities in supportant provides nutrition screening, nutrition education, supplemental food and referral to needed Community operation of provides nutrition screening, nutrition education, supplemental food and referral to needed Community operation between their health and quality of life.  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community obstanting maintenance and the administration of a healthy lifestyle for Native American ransportation support, community/school screenings, exercise passes/programs and nutrition	Srv Unit	Unit Re	egion	Remarks
The Diabetes Program provides for the diabetic patient's education and case management and the prospective diabetic incial screening. The program is supported clinically with pre-renal examiniations and Podiatry care.  Idider Care - Outreach # of FTE 0.0 0.0 3.35  Idider Care provides an open and supportive environment as well as an outreach program for the community's elders ducation and health benefit counseling is provided by the staff.  IMS 335 Loc #1 - # of FTE 0.0 0.0 0.0 3.35  Image: # of Ambulances 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.			From	St. Ignatius
ider Care - Outreach # of FTE 0.0  Ider Care provides an open and supportive environment as well as an outreach program for the community's elders ducation and health benefit counseling is provided by the staff.  IMS 335 Loc #1 +# of FTE 0.0 0.0 335  # of Ambulances 0.0 0.0 0.0  Loc #2 - # of FTE 0.0 0.0 0.0  # of Ambulances 0.0 0.0 0.0  Loc #3 - # of FTE 0.0 0.0 0.0  # of Ambulances 0.0 0.0 0.0  # of Ambulances 0.0 0.0 0.0 0.0  # of Ambulances 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	betic patient	patient with p		
ider Care provides an open and supportive environment as well as an outreach program for the community's elders ducation and health benefit counseling is provided by the staff.  MS 335 Loc #1 +# of FTE 0.0 0.0 0.335  # of Ambulances 0.0 0.0 0.0  Loc #2 -# of FTE 0.0 0.0 0.0  # of Ambulances 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.				
ducation and health benefit counseling is provided by the staft.  MS 335 Loc #1 - # of FTE 0.0 0.0 335  # of Ambulances 0.0 0.0 0.0  # of Ambulances 0.0 0.0 0.0  # of FTE 0.0 0.0				
# of Ambulances 0.0 0.0  # of FTE 0.	ers. Lunch dis	nch distribut	tion, soci	al functions, hea
# of Ambulances 0.0 0.0 Loc #2 -# of FTE 0.0 0.0 # of Ambulances 0.0 0.0 # of FTE 0.				
Loc #2 - # of FTE 0.0 0.0  # of Ambulances 0.0 0.0  Loc #3 - # of FTE 0.0 0.0  # of Ambulances 0.0 0.0  # of FTE 0.0 0.0  # of FT				
# of Ambulances 0.0 0.0  Loc #3 -# of FTE 0.0 0.0  # of Ambulances 0.0 0.0  # of FTE 0.0 0.0 0.0  # of FTE 0.0 0.0  # of FTE				
Loc #3 - # of FTE				
# of Ambulances 0.0 0.0  Intergency Medical Services provide emergency medical services within the boundaries of a service unit. Ambulance even days a week, staffed with State Certified EMT, IEMT and Paramedics.  Interpretation # of FTE 0.0 0.0  Interpretation # of FTE 0.0 0.0  Interpretation # of FTE 0.0 0.0  Inansportation # of FTE 0.0  Inansportation bepartment transports community residents to health related facilities within the service unit, and sun curred for automotive operation and maintenance and the administration of garage and dispatching activities in superior in the service of the service unit, and sun curred for automotive operation and maintenance and the administration of garage and dispatching activities in superior in the service of the service unit residents, while resonal control over their health and quality of life.  In Interpretation of the first the services for service unit residents, while resonal control over their health and quality of life.  In Interpretation of the first the services for service unit residents, while resonal control over their health and quality of life.  In Interpretation of the first the services for service unit residents, while resonal control over their health and quality of life.  In Interpretation of the first the services for service unit residents, while resonal control over their health and quality of life.  In Interpretation of the first the services and services and surface income guidelines (185% poverty) and are found soft part when the services of a gave who meet income guidelines (185% poverty) and are found soft part when the services of a gave who meet income guidelines (185% poverty) and are found soft part when the services of a gave have meet income guidelines (185% poverty) and are found soft part when the services of a gave have meet income guidelines (185% poverty) and are found soft part when the services of a gave have the services of a service unit residents of services and nutrition leading to a healthy lifestyle for Native American ans				
even days a week, staffed with State Certified EMT, IEMT and Paramedics.  We of FTE 0.0 0.0  Country is responsible for the safety and well being of hospital patients, visitors, and personnel. It includes physical rounds, and interiors of the facility.  Transportation # of FTE 0.0  Transportation Department transports community residents to health related facilities within the service unit, and surrectivered for automotive operation and maintenance and the administration of garage and dispatching activities in sugnificant events of the safety of FTE 0.0 0.0  Tribal Health Administration # of FTE 0.0 0.0  Tribal Health Administration Department oversees and ensures quality health services for service unit residents, while resonal control over their health and quality of life.  WIC # of FTE 0.0 1.0  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostspartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found outreach Diabetes program promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ansportation support, community/school screenings, exercise passes/programs and nutrition classes.  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Wellness Center # of FTE 0.0 0.0  Evenorial Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Wellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, activity of the programs such as the programs as Elder Care, Diabetes, CHRs etc.  Tamily Planning/Domestic Violence Programs as Elder Care, Diabetes, CHRs etc.  Tamily Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterification procedures, and pre-natal				
decurity is responsible for the safety and well being of hospital patients, visitors, and personnel. It includes physical rounds, and interiors of the facility.  Transportation # of FTE 0.0  Transportation # of FTE 0.0  Transportation # of FTE 0.0  Transportation Department transports community residents to health related facilities within the service unit, and surn curred for automotive operation and maintenance and the administration of garage and dispatching activities in superiorized for automotive operation and maintenance and the administration of garage and dispatching activities in superiorized for automotive operation and maintenance and the administration of garage and dispatching activities in superiorized for automotive operation and maintenance and the administration of garage and dispatching activities in superiorized for automotive operation and maintenance and the administration of garage and dispatching activities in superiorized for a dispatch in superiorized for a superiorized for sup	nces are ava	re available	twenty-fo	our hours a day
recurity is responsible for the safety and well being of hospital patients, visitors, and personnel. It includes physical rounds, and interiors of the facility.  Iransportation # of FTE 0.0 arransportation pepartment transports community residents to health related facilities within the service unit, and sum incurred for automotive operation and maintenance and the administration of garage and dispatching activities in superior and the administration of garage and dispatching activities in superior and personal control over their health and quality of life.  WIC # of FTE 0.0 0.0  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostiparium women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found suppartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found surface. Diabetes program promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ansportation support, community/school screenings, exercise passes/programs and nutrition classes.  Personal Care Attendants # of FTE 0.0 0.0  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Wellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, actir support or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Tamily Planning/Domestic Violence promotes Native American health through emphasizing benefits of family plannir ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family pit of omestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist their programs such as WIC, PHN, MAMI etc.  AS/FAE # of FTE 0.0 0.0  Personal Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregn				
ransportation # of FTE 0.0 ransportation Department transports community residents to health related facilities within the service unit, and sun curred for automotive operation and maintenance and the administration of garage and dispatching activities in sugnifical Health Administration Department oversees and ensures quality health services for service unit residents, while resonal control over their health and quality of life.  WIC Wic Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found outreach Diabetes program promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ansportation support, community/school screenings, exercise passes/programs and nutrition classes.  Versonal Care Attendants # of FTE 0.0 0.0  Vellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, active proper or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Amily Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification munitylindividual education, and supportive prevention activities.  MAMI Project is a state funded program that works with "high risk" pregnam monthers, often referred through outreactive admining may be promotes improved health among post-cardiac procedure patients (such as those recovering from operatives rehabilisation. Assessment by	-1		!	
ransportation # of FTE 0.0 ransportation Department transports community residents to health related facilities within the service unit, and surn incurred for automotive operation and maintenance and the administration of garage and dispatching activities in superior for automotive operation and maintenance and the administration of garage and dispatching activities in superior for automotive operation and maintenance and the administration of garage and dispatching activities in superior for automotive operation and maintenance and the administration of garage and dispatching activities in superior for a first part of FTE 0.0 0.0  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community obstpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found support and promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ansportation support, community/school screenings, exercise passes/programs and nutrition classes.  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Personal Care Attendants work with Bright Procedures, and pre-natal/post-natal home visits to discuss family proper or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Family Planning/Domestic Violence pro	ai security of	ırıty ot parkıl	ing iots, s	urrounaing
ransportation Department transports community residents to health related facilities within the service unit, and surn curred for automotive operation and maintenance and the administration of garage and dispatching activities in support of automotive operation and maintenance and the administration of garage and dispatching activities in support of the property of the provision of shelters/safe houses and/or referrals to other Domestic Violence assist of the property of the provision of shelters/safe houses and/or referrals to other Domestic Violence assist the property of the provision of shelters/safe houses and/or referrals to other Domestic Violence assist the property of the property of the provision of shelters/safe houses and/or referrals to other Domestic Violence assist the property of the property of the provision of shelters/safe houses and/or referrals to other Domestic Violence assis				
Tribal Health Administration # of FTE 0.0 0.0  Tribal Health Administration # of FTE 0.0 0.0  Tribal Health Administration Department oversees and ensures quality health services for service unit residents, while resonal control over their health and quality of life.  # of FTE 0.0 1.0  WIC # of FTE 0.0 1.0  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found outreach Diabetes program promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ransportation support, community/school screenings, exercise passes/programs and nutrition classes.  Personal Care Attendants # of FTE 0.0 0.0  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Wellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, actir upport or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Tamily Planning/Domestic Violenc # of FTE 0.0 0.0  Tamily Planning/Domestic Violenc promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning/Individual education, and supportive prevention activities.  # of FTE 0.0 0.0  The FTE	urroundina ci	dina cities It	It includes	s all the expense
ribal Health Administration Department oversees and ensures quality health services for service unit residents, while resonal control over their health and quality of life.  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found outreach Diabetes  # of FTE	_	_		•
ribal Health Administration Department oversees and ensures quality health services for service unit residents, while resonal control over their health and quality of life.  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found outreach Diabetes  # of FTE				
resonal control over their health and quality of life.  WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found outreach Diabetes # of FTE 0.0 0.0  Dutreach Diabetes # of FTE 0.0 0.0  Dutreach Diabetes program promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ransportation support, community/school screenings, exercise passes/programs and nutrition classes.  Personal Care Attendants # of FTE 0.0 0.0  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure NDLs (Activities for Daily Living).  Wellness Center # of FTE 0.0 2.0 Fersonal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure Note (Activities for Daily Living).  Wellness Center # of FTE 0.0 0.0  Fersonal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure Note (Note) for Daily Living).  Wellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, actir upport or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family pid formestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist their programs such as WIC, PHN, MIAMI etc.  Fersonal Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies througers on a support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification ormunity/individual education, and supportive prevention activities.  MIAMI Project is a state f	h://		X	
WIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found Dutreach Diabetes # of FTE 0.0 0.0  Dutreach Diabetes program promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ransportation support, community/school screenings, exercise passes/programs and nutrition classes.  Dersonal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure NDLs (Activities for Daily Living).  Wellness Center # of FTE 0.0 0.0  Vellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, active upport or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning to dience through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist ther programs such as WIC, PHN, MIAMI etc.  FAS/FAE # of FTE 0.0 0.0  FAS/FAE # of	niie encourag	couraging m	more seit-	-reliance and
VIC Program provides nutrition screening, nutrition education, supplemental food and referral to needed Community ostpartum women, infants and children <5 years of age who meet income guidelines (185% poverty) and are found outreach Diabetes # of FTE 0.0 0.0  Dutreach Diabetes program promotes proper exercise and nutrition leading to a healthy lifestyle for Native American ransportation support, community/school screenings, exercise passes/programs and nutrition classes.  Personal Care Attendants # of FTE 0.0 0.0  Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure DLs (Activities for Daily Living).  Vellness Center # of FTE 0.0 2.0 F  Vellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, actir upport or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  amily Planning/Domestic Violenc # of FTE 0.0 0.0  family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning such as WIC, PHN, MIAMI etc.  ASIFAE # of FTE 0.0 0.0  FASIFAE # of FTE 0.0 0.0  ANIAMI Project to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification ommunity/individual education, and supportive prevention activities.  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outreac riteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counsele anintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operatories rehabiliation. Assessment by treadmill testing is followed by custom exercise programming strictly followed				
Personal Care Attendants  # of FTE	ans through o	ough comm	nunity out	reach,
Personal Care Attendants work with elderly and/or disabled Native Americans following a stroke, medical procedure ADLs (Activities for Daily Living).  Wellness Center # of FTE 0.0 2.0 Following and education for Native Americans of all ages, active support or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Family Planning/Domestic Violenc # of FTE 0.0 0.0  Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning doucation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family plan of domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist with the programs such as WIC, PHN, MIAMI etc.  FAS/FAE # of FTE 0.0 0.0  Feetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies through the program twomen at risk. Developmental and/or diagnostical clinical functions include identification from munity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread referring defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseler maintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operators are rehabilitation. Assessment by treadmill testing is followed by custom exercise programming strictly followed.				
Nellness Center # of FTE 0.0 2.0 F Wellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, actir support or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Family Planning/Domestic Violenc # of FTE 0.0 0.0  Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family plan for domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist other programs such as WIC, PHN, MIAMI etc.  FAS/FAE # of FTE 0.0 0.0  Fetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies through emphasizing to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification or munity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread ratieria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counselemantaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operators rehabilitation. Assessment by treadmill testing is followed by custom exercise programming strictly followed				
Vellness Center # of FTE 0.0 2.0 F Vellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, actir upport or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Family Planning/Domestic Violenc # of FTE 0.0 0.0  Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family pl f domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist ther programs such as WIC, PHN, MIAMI etc.  FAS/FAE # of FTE 0.0 0.0  FETAL Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies througe ersonal support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification formunity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread friteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseler friteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseler friteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseler friteria defining personal health habits that may lead to the birth of a healthy child.  FACTION ON O	re or loss of f	ss of functio	on, visitin	g and assisting t
Wellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, actir support or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Family Planning/Domestic Violence  # of FTE	D			
Family Planning/Domestic Violenc # of FTE 0.0 0.0  Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist other programs such as WIC, PHN, MIAMI etc.  FAS/FAE # of FTE 0.0 0.0  Fetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies through the program twomen at risk. Developmental and/or diagnostical clinical functions include identification ommunity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread ratieria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseler maintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operators of the programming strictly followed by custom exercise programming strictly followed		of Tribal C		,
Family Planning/Domestic Violence # of FTE 0.0 0.0  Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist their programs such as WIC, PHN, MIAMI etc.  FAS/FAE # of FTE 0.0 0.0  Fetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies through error all support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification ommunity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread riteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseler naintaining personal health habits that may lead to the birth of a healthy child.  Fardiac Rehab # of FTE 0.0 0.0  Fardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operators rehabiliation. Assessment by treadmill testing is followed by custom exercise programming strictly followed.	ung enner as	iller as all ill	luepellue	ent service or in
Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist their programs such as WIC, PHN, MIAMI etc.  FAS/FAE # of FTE 0.0 0.0  Fetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies through ersonal support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification ommunity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread riteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counsele naintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from optox procedure patients) and the programming strictly followed by custom exercise programming strictly followed				
ducation, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family put of domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assist ther programs such as WIC, PHN, MIAMI etc.  AS/FAE # of FTE 0.0 0.0  Tetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies through ersonal support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification ommunity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread riterial defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseler naintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from option of the programming strictly followed by custom exercise programming strictly followed	ning and suni	nd supporting	na such e	mnhases throug
Tetal Alcohol Syndrome (FAS) / Fetal Alcohol Education (FAE) programs promote/support healthy pregnancies through ersonal support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification ommunity/individual education, and supportive prevention activities.  MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outread defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseled naintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operators of the programming strictly followed by custom exercise programming strictly followed	planning nee	ing needs; a	as well as	lowering incider
ersonal support to pregnant women at risk. Developmental and/or diagnostical clinical functions include identification ommunity/individual education, and supportive prevention activities.  AIAMI Project # of FTE 0.0 0.0  AIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outreach riteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseled naintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from open cardiac rehabiliation. Assessment by treadmill testing is followed by custom exercise programming strictly followed				
ommunity/individual education, and supportive prevention activities.  AIAMI Project # of FTE 0.0 0.0  AIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outreactive a defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseled naintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from open cardiac rehabilisation. Assessment by treadmill testing is followed by custom exercise programming strictly followed	-			_
MIAMI Project # of FTE 0.0 0.0  MIAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outreach criteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseled maintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operators of the programming strictly followed by custom exercise programming strictly followed	ation of FA sta	FA statistic	cs and res	search,
MAMI Project is a state funded program that works with "high risk" pregnant mothers, often referred through outreac riteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseled naintaining personal health habits that may lead to the birth of a healthy child. Cardiac Rehab # of FTE 0.0 0.0 Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from op- cardiac rehabiliation. Assessment by treadmill testing is followed by custom exercise programming strictly followed				
riteria defining "high risk" (age, previous birth weight, health history etc.), patients are identified, educated, counseled naintaining personal health habits that may lead to the birth of a healthy child.  Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from operations of the cardiac procedure) as the cardiac programming strictly followed by custom exercise programming strictly followed	oob ootiviti	tivitios or -	DUN 11	ilizina otondo!:
Cardiac Rehab # of FTE 0.0 0.0  Cardiac Rehab promotes improved health among post-cardiac procedure patients (such as those recovering from op- xercise rehabiliation. Assessment by treadmill testing is followed by custom exercise programming strictly followed				
xercise rehabiliation. Assessment by treadmill testing is followed by custom exercise programming strictly followed				
encouraged toward illelong exercise entitusiasin by seeing infinediate and long term benefits of exercise throughout			-	The patient is
	ut trie reriab	erias proces		

# **Resource Allocation Plan**



# **Resource Allocation**

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

Tamily Practice   Tamily Practice   Tamily Practice   Tamily Practice   Tamily Providers to outlying areas   Provider Offices   Exam Rooms   4.0   0			Direct He	alth Care			Contr	act Healt	h Care
Primary Care	Discipline	Projected	=	-	(From	% of Need	Projected		
Visiting Providers to outlying areas.   Provider Offices   2.0   0.0   0%   Exam Rooms   4.0   0.0   0%   0%   558   \$0	Primary Care	Only					Only		
Provider Offices   2.0   0.0   0%	Family Practice	· ·		1.7	0.0	0%	0	\$58	\$0
Exam Rooms		Visiting Provid				201			
O Providers									
Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%	Into wood Modining						0	<b></b>	<b>C</b> O
Provider Offices   Double   Provider   Double   Provider   Double   Provider   Double   Provider   Double   D	internal Medicine			0.0	0.0	100%	U	<b>\$58</b>	φU
Exam Rooms		VISITING Provid		0.0	0.0	4000/			
Peculatric   0									
Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%	Pediatric	0					0	\$54	\$0
Provider Offices   Exam Rooms   0.0   0.0   100%	i ediatric			0.0	0.0	100 /0	U	ΨΟΨ	ΨΟ
Exam Rooms   0.0   0.0   100%   100		Visiting i Tovio		0.0	0.0	100%			
O   Providers   O   O   O   O   D00%									
Visiting Providers to outlying areas.   Provider Offices   Provider Visiting Provider Offices   Provider Visiting Provider Offices   Provider Visiting Provider Offices   Provider Visiting Provider Offices   Provider Offi	Ob/Gvn	0					0	\$261	\$0
Provider Offices   0.0   0.0   100%	- · <del>- </del>						_	<b>7_4</b>	, -
Exam Rooms				0.0	0.0	100%			
Primary Care Total									
Provider Offices   2.0   0.0   0%	Primary Care Total	7,607	Providers				0		\$0
Exam Rooms   4.0   0.0	•		Provider Offices	2.0	0.0	0%			
Dept. Gross Sq. Mtrs   292.0   0.0   0%		Nursing Sup		2.6					
Committee   Comm					0.0	0%			
Nursing Support (RN+LPN)   0.0   100%   Patient Spaces   0.0   0.0   100%   Dept. Gross Sq. Mtrs   0.0   0.0   100%   Dept. Gross   0.0			Dept. Gross Sq. Mtrs	292.0	0.0	0%			
Nursing Support (RN+LPN)   0.0   100%   Patient Spaces   0.0   0.0   100%   Dept. Gross Sq. Mtrs   0.0   0.0   100%   Dept. Gross   0.0									
Patient Spaces   Dept. Gross Sq. Mtrs   D.0   D.0   100%   Dept. Gross Sq. Mtrs   D.0   D.0   Dept. Gross Sq. Mtrs   D.0   D.0   Dept. Gross Sq. Mtrs   D.0   Dept. Gross Sq. Mtrs   D.0   D.0   Dept. Gross Sq. Mtrs   D.0   Dept. Gross Sq. Mtrs   D.0   D.0   Dept. Gross Sq. Mtrs   Dept. Gross Sq. Mtrs   D.0   Dept. Gross Sq. Mtrs   Dept. Gross Sq. Mtrs   D.0   D.0   Dept. Gross Sq. Mtrs   D.0   Dept. Gross Sq	Emergency Care	-			0.0		0	\$247	\$0
Dept. Gross Sq. Mtrs   0.0   0.0   100%   Provider Visits   Only   O   Provider Visits   Only   O   Provider Visits   Only   O   \$226   \$0   Visiting Provider to outlying areas.   Provider Offices   Exam Rooms   0.0   0.0   100%   O   \$222   \$0   Visiting Provider to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$292   \$0   Visiting Provider Offices   0.0   0.0   100%   O   \$292   \$0   Visiting Provider Offices   0.0   0.0   100%   O   \$135   \$0   Visiting Providers to outlying areas.   Provider Offices   Exam Rooms   0.0   0.0   100%   O   \$135   \$0   Visiting Providers to outlying areas.   Provider Offices   Exam Rooms   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   Exam Rooms   0.0   0.0   100%   O   \$191   \$0   Visiting Providers to outlying areas.   Provider Offices   Exam Rooms   0.0   0.0   100%   O   \$191   \$0   Visiting Providers to outlying areas.   Provider Offices   Exam Rooms   0.0   0.0   100%   O   \$231   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$231   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$231   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting Providers to outlying areas.   Provider Offices   0.0   0.0   100%   O   \$187   \$0   Visiting		Nursir		0.0					
Provider Visits			•		0.0				
Only			Dept. Gross Sq. Mtrs	0.0	0.0	100%			
O	Specialty Care								
Visiting Providers to outlying areas.   Provider Offices   Double Offices   Provider Offices   Double Offices   Provider Offices   Provider Offices   Double Offices   Provider Offices   Double Offices   Double Offices   Provider Offices   Double Offices   Dou	•		Providere	0.0	0.0	100%		¢226	90
Provider Offices   Depth   D	Orthopedics			0.0	0.0	100 /6	U	φΖΖΟ	ΨΟ
Exam Rooms   0.0   0.0   100%   0   \$292   \$0		Visiting i Tovio		0.0	0.0	100%			
O									
Visiting Providers to outlying areas.   Provider Offices   Exam Rooms   O.0   0.0   100%	Onhthalmology	0					0	\$292	\$0
Provider Offices   0.0   0.0   100%   Exam Rooms   0.0   0.0   100%   0   1	opitalamology			0.0	0.0	10070	Ü	Ψ202	ΨΟ
Exam Rooms   0.0   0.0   100%   0   \$135   \$0		v.og		0.0	0.0	100%			
O									
Visiting Providers to outlying areas.  Provider Offices Exam Rooms 0.0 0.0 100% Exam Rooms 0.0 0.0 100%  Overline Providers 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	Dermatology	0					0	\$135	\$0
Provider Offices   0.0   0.0   100%	- 37	Visiting Provid							
Exam Rooms   0.0   0.0   100%   0   100%		<b>9</b>		0.0	0.0	100%			
O Providers									
Visiting Providers to outlying areas.  Provider Offices Exam Rooms 0.0 0.0 100% Exam Rooms 0.0 0.0 100% Otolaryngology  0 Providers Visiting Providers to outlying areas. Provider Offices Exam Rooms 0.0 0.0 100% Ovisiting Providers to outlying areas. Providers Visiting Providers to outlying areas. Provider Offices Exam Rooms 0.0 0.0 100% Ovisiting Providers 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	General Surgery	0					0	\$187	\$0
Provider Offices   0.0   0.0   100%	• •	Visiting Provid	ers to outlying areas.						
Exam Rooms   0.0   0.0   100%		•		0.0	0.0	100%			
Otolaryngology         0 Providers Visiting Providers to outlying areas. Provider Offices Exam Rooms         0.0 0.0 100% 100% 0.0 10			Exam Rooms						
Provider Offices Exam Rooms 0.0 0.0 100% Exam Rooms 0.0 0.0 100%  O Providers 0.0 0.00 100%  Visiting Providers to outlying areas. Provider Offices Exam Rooms 0.0 0.0 100%  O Providers 0.0 0.0 100%  Visiting Providers 0.0 0.0 100%  Visiting Providers 0.0 0.0 100%  Visiting Providers 0.0 0.0 100%  O Providers 0.0 0.0 100%  Visiting Providers to outlying areas. Provider Offices 0.0 0.0 100%	Otolaryngology			0.0	0.0	100%	0	\$191	\$0
Exam Rooms   0.0   0.0   100%		Visiting Provid							
O Providers 0.0 0.000 100% 0 \$231 \$0  Visiting Providers to outlying areas.  Provider Offices 0.0 0.0 100%  Exam Rooms 0.0 0.0 100%  Urology 0 Providers 0.0 0.0 100%  Visiting Providers to outlying areas.  Provider Offices 0.0 0.0 100%  Visiting Providers to outlying areas.  Provider Offices 0.0 0.0 100%									
Visiting Providers to outlying areas.  Provider Offices Exam Rooms 0.0 0.0 100%  0.0 100%  100%  0 Providers 0.0 0.0 100%  Visiting Providers to outlying areas. Provider Offices 0.0 0.0 100% 0 \$187 \$0									
Provider Offices Exam Rooms         0.0 0.0 100% 100% 100% 100% 100% 100% 10	Cardiology			0.0	0.000	100%	0	\$231	\$0
Exam Rooms   0.0   0.0   100%		Visiting Provid							
Urology 0 Providers 0.0 0.0 100% 0 \$187 \$0  Visiting Providers to outlying areas. Provider Offices 0.0 0.0 100%									
Visiting Providers to outlying areas.  Provider Offices  0.0  100%									
Provider Offices 0.0 0.0 100%	Urology			0.0	0.0	100%	0	\$187	\$0
		Visiting Provid							
Exam Rooms 0.0 0.0 <b>100%</b>									
			Exam Rooms	0.0	0.0	100%			

# **Resource Allocation Plan**



# **Resource Allocation**

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Contract Health Care						
		Direct Hea		Evict VC			ast Ficult	
	Planned	Key Characteristics	# Req'd in	Exist KC (From		Planned	Cost /	Total CH
Discipline	Projected	(KC)	2015	Quest.)	% of Need	Projected	Unit	Dollars
Neurology	0	Providers	0.0	0.000	100%	0	\$198	\$0
3,	Visiting Provid	lers to outlying areas.					,	• •
	· ·	Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Other Subspecialties						0	\$571	\$0
Nephrology	-	Providers	0.0	0.0	100%			
Hopinology		lers to outlying areas.	0.0	0.0	10070			
	rioining rioini	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Allergy		Providers	0.0	0.0	100%			
,e. gy	Visiting Provid	lers to outlying areas.	0.0	0.0	100,0			
	rioining i rovie	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Pulmonology		Providers	0.0		100%			
r unionology	Visiting Provid	ders to outlying areas.	0.0		10070			
	violing i rovic	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Gerontology		Providers	0.0		100%			
Corontology	Visiting Provid	lers to outlying areas.	0.0		10070			
	rioining i rovie	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Gastroenterology		Providers	0.0		100%			
Guoti Goilloidigy	Visiting Provid	ders to outlying areas.	0.0		10070			
	violing i rovic	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Rheumatology		Providers	0.0		100%			
randamatelegy	Visiting Provid	ders to outlying areas.	0.0		10070			
	violing i rovic	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Oncology		Providers	0.0		100%			
G55.15gy	Visiting Provid	lers to outlying areas.	0.0		100,0			
	violing i rovic	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Pediatric-Genetics		Providers	0.0		100%			
r calatile conclude	Visiting Provid	lers to outlying areas.	0.0		10070			
	Violating i Tovic	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Traditional Healing		Providers	1.0		0%			
		Provider Offices	1.0		0%			
		Exam Rooms	1.0		0%			
Podiatry Visits	0	Podiatrists	0.0	0.0	100%	0	\$0	\$0
Todadiy viole	-	ders to outlying areas.	0.0	0.0	10070	Ü	ΨΟ	ΨΟ
	rioining i rovie	Podiatry Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Specialty Care Sub-Total	0	Exam Rooms	1.0	0.0	0%	0		\$0
		Provider Offices	1.0	0.0	0%			, ,
		Dept. Gross Sq. Mtrs	73.0	0.0	0%			
Total In-House Providers	7,607	Providers	2.7	0.0	0%			
	,							
Visiting Professional Clinic	1,113	Exam	1.0	0.0	0%			
		Provider Offices	1.0	0.0	0%			
		Dept. Gross Sq. Mtrs	73.0	0.0	0%			
	· · · · · · · · · · · · · · · · · · ·	·			<del>_</del>			

# **Resource Allocation Plan**



# **Resource Allocation**

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct He	alth Care			Conti	ract Health	n Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Other Ambulatory Care								
Services	_							
Dental Service Minutes	0	Dentists	0.0	0.0	100%	0	\$0	\$0
	Visiting Provid	ders to outlying areas.						
		Hygenists	0.0		100%			
		Dental Chair	0.0	0.0	100%			
	_	Dept. Gross Sq. Mtrs		0.0	100%			
Optometry Visits	0	Optometrist	0.0	0.0	100%	0	\$0	\$0
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0	0.0	100%			
		Eye Lanes	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			
Dialysis Patients	0	Dialysis Stations	0.0	0.0	100%	0	\$856	\$0
		Dept. Gross Sq. Mtrs	0.0		100%			
Audiology Visits	0	Audiologists	0.0	0.0	100%	0	\$304	\$0
	Visiting Provid	ders to outlying areas.						
	_	Audiologist Offices	0.0	0.0	100%			
		Audiology Booths	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs		0.0	100%			
Behavioral Health	<del></del>							
Mental Health Visits		Counselors	0.0	0.0	100%			
Psychiatry	<del>-</del>	Counselors	0.0	0.0	100%			
Social Service Visits	<del>-</del>	Counselors	0.0	0.0	100%			
Alcohol & Substance Abuse	<del></del>	Counselors	0.0	0.0	100%			
Behavioral Health Total		Total Counselors	0.0	0.0	100%	0	\$0	\$0
Bonavioral Floatin Fotal	Visiting Provid	ders to outlying areas.	0.0	0.0	10070		ΨΟ	40
	Tionang Troth	Counselor Offices	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs		0.0	100%			
loon at land Oans		Dopt. Grood eq. Mac	0.0	0.0		10.0		, , ,
Inpatient Care Births	0	LDRPs	0.0	0.0	100%	HS \$ are at SU 0	\$2,859	or Flathead \$0
Dituis	O	Dept. Gross Sq. Mtrs		0.0	100%	U	φ2,059	ΨΟ
Obstatria Patient Days	0	Post Partum beds				0		
Obstetric Patient Days	U		0.0 0.0	0.0 0.0	100% 100%	U		
Neonatology Patient Days	0	Dept. Gross Sq. Mtrs # of Bassinets	0.0	0.0	100%	0	\$1,203	\$0
Neonalology Patient Days	U			0.0		U	φ1,203	φυ
Podiatric Patient Days	0	Dept. Gross Sq. Mtrs # of Beds	0.0	0.0	100%	0	¢1 202	\$0
Pediatric Patient Days	U				100%	U	\$1,203	φυ
Adult Madical Asuta Cara	0	Dept. Gross Sq. Mtrs		0.0	100%	0	¢007	¢Λ
Adult Medical Acute Care	0	# of Beds	0.0	0.0	100%	0	\$827	\$0
Adult Curainal Asuta Cara	0	Dept. Gross Sq. Mtrs # of Beds	0.0	0.0	100%	0	<b>#007</b>	\$0
Adult Surgical Acute Care	U			0.0	100%	U	\$827	φU
Intensityo Core Datient David		Dept. Gross Sq. Mtrs		0.0	100%	^	0007	<b>60</b>
Intensive Care Patient Days	0	# of Beds	0.0	0.0	100%	0	\$827	\$0
Developing Deficient Deve		Dept. Gross Sq. Mtrs		0.0	100%	•	<b>ው</b> ጋጋር	<b>#</b> 0
Psychiatric Patient Days	0	# of Beds	0.0	0.0	100%	0	\$335	\$0
		Dept. Gross Sq. Mtrs			100%	•	0000	<b>#</b> 0
Madical Datas D. C. C.D.	^		0.0		100%	0	\$399	\$0
Medical Detox Patient Days	0	# of Beds						
	_	Dept. Gross Sq. Mtrs	0.0		100%			
Medical Detox Patient Days  Sub Acute/Transitional Care	0	Dept. Gross Sq. Mtrs # of Beds	0.0	0.0	100%			
Sub Acute/Transitional Care	0	Dept. Gross Sq. Mtrs # of Beds Dept. Gross Sq. Mtrs	0.0 0.0 0.0	0.0	100% 100%			
	_	Dept. Gross Sq. Mtrs # of Beds	0.0 0.0 0.0		100%	0		\$0

# **Resource Allocation Plan**



# **Resource Allocation**

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct Hea	alth Care			Cont	ract Healtl	n Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Ancillary Services								
Laboratory Services								
Clinical Lab	0	Tech staff @ peak	0.0	0.0	100%			
Microbiology Lab	0	Tech staff @ peak	0.0	0.0	100%			
Blood Bank	0	Tech staff @ peak	0.0	0.0	100%			
Anatomical Pathology	0	Tech staff @ peak	0.0		100%			
Lab Total	0	Tech staff @ peak	0.0	0.0	100%	242	\$175	\$42,369
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			
Pharmacy	0	Pharmacists	0.0	0.0	100%	0	\$0	\$0
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			
Acute Dialysis	0	Rooms	0.0	0.1	100%			
<u> </u>	-	Dept. Gross Sq. Mtrs	0.0	0.0	100%	-		
Diagnostic Imaging	0	D	0.0	0.0	4000/	0	0005	<b>#</b> 0
Radiographic exams	0	Rooms	0.0	0.0	100%	0	\$205	\$0
Ultrasound Exams	0	Rooms	0.0	0.0	100%	0	\$227	\$0 \$0
Mammography Exams	0	Rooms			100%	0	\$57 \$62	
Fluoroscopy Exams CT	0	Rooms Rooms	0.0	0.0	100%	0	\$602	\$0 \$0
MRI exams	0	Rooms	0.0	0.0	100%	0	\$813	\$0 \$0
Diagnostic Imaging Total	0	Radiologists	0.0	0.0	100%	0	φοιο	\$0
Diagnostic imaging Total	U	Dept. Gross Sq. Mtrs	0.0	0.0	100%	U		ΦΟ
Nuclear Medicine	0	Rooms	0.0	0.0	100%	0	\$511	\$0
Tracical Medicine	U	Dept. Gross Sq. Mtrs	0.0	0.0	100%	O	ΨΟΙΙ	ΨΟ
Radiation Oncology	0	Rooms	0.0		100%			
radiation oncology	Ü	Dept. Gross Sq. Mtrs	0.0		100%			
Chemotherapy	0	Patient Spaces	0.0		100%	0	\$779	\$0
		Dept. Gross Sq. Mtrs	0.0		100%		4	**
Rehabilitation Services								
PT Visits		Therapy FTE	0.0	0.0	100%			
OT Visits		Therapy FTE	0.0	0.0	100%			
Speech Therapy Visits		Therapy FTE	0.0	0.0	100%			
Rehab Total	0	Therapy FTE	0.0	0.0	100%	0	\$210	\$0
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			
RT Workload Minutes	0	Therapy FTE	0.0	0.0	100%	10,415		\$0
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			
Cardiac Catherization	0	Rooms	0.0		100%	0	\$2,503	\$0
		Dept. Gross Sq. Mtrs	0.0		100%			
Surgery								
Outpatient Endoscopy Cases	0	Endoscopy Suites	0.0	0.0	100%	0	\$1,220	\$0
Outpatient Surgery Cases	0	Outpatient ORs	0.0	0.0	100%	0	\$1,220	\$0
Inpatient Surgical Cases	0	Inpatient ORs	0.0	0.0	100%	0		\$0
		# of Pre-Op Spaces	0.0	0.0	100%			
		# of PACU Spaces	0.0	0.0	100%			
Surgical Case Total		# of Phase II Spaces # of ORs	0.0	0.0	100%	0		<b>C</b> O
Surgical Case Total	0	Dept. Gross Sq. Mtrs	0.0 0.0	0.0	100% 100%	0		\$0
		Dept. Gross Sq. Milis	0.0	0.0	100%			
Administrative Support								
Administration		# of FTE	6.0	0.0	0%			
		Dept. Gross Sq. Mtrs	114.0	0.0	0%			
Information Management		# of FTE	1.5	0.0	0%			
		Dept. Gross Sq. Mtrs	25.2	0.0	0%			
Health Information Mngmt.		# of FTE	4.2	0.0	0%			
		Dept. Gross Sq. Mtrs	32.3	0.0	0%			
Business Office		# of FTE	2.0	0.0	0%			
		Dept. Gross Sq. Mtrs	30.0	0.0	0%			
Contract Health		# of FTE	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			

# **Resource Allocation Plan**



# **Resource Allocation**

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct Hea	alth Care			Contract Health Care				
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars		
Facility Support Services										
Clinical Engineering	#	f of FTE	0.0	0.0	100%					
		Dept. Gross Sq. Mtrs	0.0	0.0	100%					
Facility Management		f of FTE	0.0	0.0	100%					
		Dept. Gross Sq. Mtrs		0.0	100%					
Central Sterile		f of FTE	0.7	0.0	0%					
N:-4		Dept. Gross Sq. Mtrs		0.0	0%					
Dietary		of FTE	0.0	0.0	100%					
Property & Supply		Dept. Gross Sq. Mtrs # of FTE	0.0	0.0	100% 0%					
Froperty & Supply		Por FTE Dept. Gross Sq. Mtrs	23.2	0.0	0%					
Housekeeping & Linen		f of FTE	0.0	0.0	100%					
Todockeeping & Ellien		Dept. Gross Sq. Mtrs		0.0	100%					
Preventive Care										
Public Health Nursing	- <del> </del>	f of FTE	3.0	0.0	0%					
· · · · · · · · · · · · · · · · · · ·		ers to outlying areas.								
	Ŭ [	Dept. Gross Sq. Mtrs	52.8	0.0	0%					
Public Health Nutrition		f of FTE	1.0	0.0	0%					
	Visiting Provide	ers to outlying areas.								
		Dept. Gross Sq. Mtrs	11.9	0.0	0%					
Environmental Health	#	f of FTE	0.0	0.0	100%					
		Dept. Gross Sq. Mtrs		0.0	100%					
Health Education		f of FTE	0.0	0.0	100%					
		Dept. Gross Sq. Mtrs		0.0	100%					
Case Management		f of FTE	0.0	0.0	100%					
	•	ers to outlying areas.	0.0	0.0	4000/					
OLID.		Dept. Gross Sq. Mtrs		0.0	100%					
CHR		of FTE	2.0 27.2	0.0	0%					
Diabetes Program		Dept. Gross Sq. Mtrs f of FTE	0.0	0.0	0% 100%					
Diabetes Program		Por FTE Dept. Gross Sq. Mtrs		0.0	100%					
Wellness Center		of FTE	2.0	0.0	0%					
Weiliness Seriel		Bldg. Gross Sq. Mtrs.		0.0	0%					
WIC		of FTE	1.0	0.0	0%					
		Dept. Gross Sq. Mtrs			0%					
Additional Services - IHS Su	pported									
Hostel Services	· <del></del>	Rooms	0.0		100%					
		Dept. Gross Sq. Mtrs			100%					
EMS		f of FTE	0.0		100%	335	\$0	\$0		
	#	f of Ambulances	0.0		100%					
	[	Dept. Gross Sq. Mtrs	0.0		100%					
Security	#	f of FTE	0.0		100%					
		Dept. Gross Sq. Mtrs			100%					
Transportation		f of FTE	0.0		100%	0	\$0	\$0		
	<u> </u>	Dept. Gross Sq. Mtrs	0.0		100%					
Total FTE Staff - IHS or IHS	6 638 RRM Supp	oorted	39.8	0.0	0%					
Total Building Gross Squa	re Meters		1,389	0	0%					
Substance Abuse Non- Acute Care										
Adult Residential Treatment		f of Beds	0.0		100%	-				
AGUIL ACCIDENTIAL FICALITETIL		Dept. Gross Sq. Mtrs	0.0		100%					

# **Resource Allocation Plan**



\$0

# **Resource Allocation**

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit very Plan.

questionnaires. Also projects ne	cessary Con	tract Health \$ by Servi	ce Line as	determined	in the Deliv		
		Direct He	alth Care				
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need		
Adolescent Residential	0	# of Beds	0.0		100%		
Treatment		Dept. Gross Sq. Mtrs	0.0		100%		
Substance Abuse Transitional	0	# of Beds	0.0		100%		
Care		Dept. Gross Sq. Mtrs	0.0		100%		
Total SANAC - Building Gros	ss Square M	eters	0	0	100%		
Additional Services - Non-IHS Supported							
Elder Care							
Manager at Linear	^	# of motions books	0.0	0.0	4000/		

Contr	Contract Health Care					
Planned	Cost /	Total CH				
Projected	Unit	Dollars				

Elder Care							
Nursing Home	0	# of patient beds	0.0	0.0	100%		
_		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Assisted Living	0	# of patient beds	0.0	0.0	100%		
_		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Hospice	0	# of patient beds	0.0	0.0	100%		
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Outreach Elder Care		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
Home Health Care	0	# of Home Health Care FTE	0.0	0.0	100%	0	\$3,42
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Elder Care Total	0	# of patient beds	0	0	100%		
		Bldg. Gross Sq. Mtrs.	0	0	100%		
Total Elder Care - Building G	Gross Squa	are Meters	0	0	100%		
Miscellaneous Services							
Tribal Health Administration		# of FTE	0.0	0.0	100%		
		Dept. Gross Sq. Mtrs	0.0		100%		
Outreach Diabetes		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
MIAMI		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
Personal Care Attendants		# of FTE	0.0	0.0	100%		
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Family Planning/Domestic		# of FTE	0.0	0.0	100%		
Violence		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
FAS/FAE		# of FTE	0.0	0.0	100%		
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Cardiac Rehab		# of FTE	0.0	0.0	100%		
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%	_	
Other		# of FTE		0.0	100%		
		Bldg. Gross Sq. Mtrs.		0.0	100%		
Other		# of FTE		0.0	100%		
		Bldg. Gross Sq. Mtrs.		0.0	100%		
Miscellaneous Services Buil	ding Gros	s Square Mtrs	0	0	100%		
						Contract F	lealth
Grand Total - Total Building	Gross Squ	uare Meters	1,389	0	0%	Dollars Su	

Contract Health Dollars Sub-Total	\$42,369
Other Expenditures - Contract Health	\$13,558
Inflation Adjusted CHS \$ - Total	\$74,942